

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
(Under 37 CFR 1.97(b) or 1.97(c))

09/554844

Docket No.

RDID0044US

In Re Application Of: Volker ZIMMER, et al.

Serial No.
To Be Assigned

Filing Date
19 May 2000

Examiner
To Be Assigned

Group Art Unit
To Be Assigned

Title: ANALYTICAL TEST ELEMENT WITH A CAPILLARY CHANNEL

Address to:

Assistant Commissioner for Patents
Washington, D.C. 20231

37 CFR 1.97(b)

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.

37 CFR 1.97(c)

2. ☐ The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:

1. a Final Action under 37 CFR 1.113, or
 2. a Notice of Allowance under 37 CFR 1.311,
- whichever occurs first.

Also submitted herewith is:

- ☐ a certification as specified in 37 CFR 1.97(e);

OR

- ☐ the fee set forth in 37 CFR 1.17(p) for submission of an Information Disclosure Statement under 37 CFR 1.97(c).

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT
 (Under 37 CFR 1.97(b) or 1.97(c))

09/554844

Docket No.

RDID0044US

In Re Application Of: Volker ZIMMER, et al.

 Serial No.
 To Be Assigned

 Filing Date
 19 May 2000

 Examiner
 To Be Assigned

 Group Art Unit
 To Be Assigned

Title: ANALYTICAL TEST ELEMENT WITH A CAPILLARY CHANNEL

Payment of Fee

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of _____ is attached.
- ☐ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. _____ as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of _____
- ☐ Credit any overpayment.
- ☐ Charge any additional fee required.

Certificate of Transmission by Facsimile*
 I certify that this document and authorization to charge
 deposit account is being facsimile transmitted to the United
 States Patent and Trademark Office (Fax. No.

) on _____
 (Date)

Signature

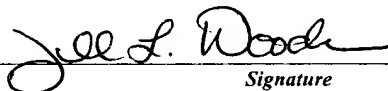
Typed or Printed Name of Person Signing Certificate

Certificate of Mailing by First Class Mail
 I certify that this document and fee is being deposited
 on _____ with the U.S. Postal Service as
 first class mail under 37 C.F.R. 1.8 and is addressed to the
 Assistant Commissioner for Patents, Washington, D.C.
 20231.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

 *This certificate may only be used if paying by
 deposit account.



Signature

Dated: 19 May 2000

 Jill Lynn Woodburn, Reg. No. 39,974
 Roche Diagnostics Corporation
 9115 Hague Road, Bldg. D
 P.O. Box 50457
 Indianapolis, IN 46250-0457
 Telephone No.: (317) 576-2851
 Facsimile No.: (317) 576-2883

CC: